

**HUMAN SERVICES DEPARTMENT[441]**

**Adopted and Filed**

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services amends Chapter 50, "Application for Assistance," Iowa Administrative Code.

This amendment allows the use of the same application for State Supplementary Assistance as is used for Medicaid, FIP, and Food Assistance. This will eliminate the need for an applicant to fill out a separate application when applying for State Supplementary Assistance as well as other programs administered by the Department.

Notice of Intended Action was published in the Iowa Administrative Bulletin as **ARC 0367C** on October 3, 2012. The Department received no comments. This amendment is identical to the one published under Notice of Intended Action.

The Council on Human Services adopted this amendment on December 12, 2012.

This amendment does not provide for waivers in specified situations because none are needed. Requests for the waiver of any rule may be submitted under the Department's general rule on exceptions at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

This amendment is intended to implement Iowa Code section 249.4.

This amendment will become effective March 1, 2013.

The following amendment is adopted.

Amend subrule 50.2(3) as follows:

**50.2(3)** Any person applying for payment for residential care shall make application at a local office of the department of human services or at the residential care facility where the person resides. Any person applying for a dependent person allowance or for payment for a protective living arrangement or in-home, health-related care shall make application at a local office of the department. An application may also be filed in any disproportionate share hospital, federally qualified health center or other facility in which outstationing activities are provided.

The application shall be made on the Health Services Application, Form 470-2927 or 470-2927(S), or the Health and Financial Support Application, Form 470-0462 or 470-0462(S). The application shall be signed by the applicant or the authorized representative. Someone acting responsibly for an incapacitated, incompetent, or deceased person may sign the application on the person's behalf.

*a. to d.* No change.

[Filed 12/12/12, effective 3/1/13]

[Published 1/9/13]

EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 1/9/13.